Training Strategy

Goals and Objectives:

To achieve the prescribed workforce milestones, Care Compass Network (CCN) is required to prepare a Training Strategy. As part of this strategic planning exercise, CCN commits to the following objectives: 1) Designating responsibility for leading and coordinating the training efforts of the PPS; 2) Evaluating the amount and type of training by audience; 3) Development of a detailed training plan, including a training timeline, to ensure successful project implementation; and 4) Identifying the means of delivering, tracking, and evaluating training across a wide network of partners. Please note: Evaluating the type and amount of training by audience will occur in two phases: Phase One, which involves identifying the general topics and workforce categories for training, will conclude DY2/Q2 with the completion of the Training Strategy. Phase Two, which involves identifying specific curriculum requirements, training content, and specific individuals to be trained, is part of the detailed training plan. Development of the detailed training plan is expected to begin DY2/Q3. Health WorkForce New York (HWNY), the contracted workforce vendor for CCN, is working with CCN partners and staff to identify and analyze training needs and resources to this end. Information resulting from the Training Strategy informed CCN's Transition Road Map. As such, please see the CCN Transition Road Map for additional information and detailed plans with respect to training initiatives. Please note: The Future State and Gap Analysis documents indicate retraining and redeployment are not considered significant fulfillment strategies for CCN. As a result, CCN considers partner/employee participation in the training strategy will be voluntary and the need for employee skill assessment as it relates to potential retraining/redeployment to be negligible at this time.

Training Strategy Oversight:

CCN determined the Workforce Lead shall be responsible for overseeing and coordinating the Training Strategy. The Workforce Lead will work closely with the Project Management Office (PMO), the Cultural Competency/Health Literacy (CC/HL) team; IT; and Partner Engagement, as well as partners in employment, training, and education to this end. The Workforce Lead is further expected to work with local, regional, and statewide partners to ensure training is developed and implemented in the most efficient and cost-effective manner possible. The Workforce Development and Transition Team (WDTT) is responsible for guiding and advising the

ongoing development and implementation of the Training Strategy and the detailed training plan in accordance with the committee charter/guiding principles.

Phase One -- Training Evaluation to Date:

The Workforce Lead and HWNY worked with the PMO, the WDTT, CC/HL, and IT to identify the amount and type of training required for successful DSRIP implementation. During this process, three types of training were identified for inclusion in the Training Strategy. They included: 1) Project-specific training; 2) Organizational work-stream specific training; and 3) Occupation-specific training for those job titles identified as high priority in the Gap Analysis also conducted by CCN as part of the DSRIP workforce milestones.

1) Project-specific training -- To identify training needs specific to the projects, the workforce team analyzed each of the related implementation plans. This information was organized by project and summarized to identify those areas of training common to multiple projects. To verify the accuracy of the data collected, HWNY reviewed this information with the Project Managers and the WDTT. The resulting table, a comprehensive Training by Project Summary, is attached herewith as Exhibit A. Please note: those trainings listed in the table, but not associated with a particular project were identified by the internal workforce team. Of the 90 trainings identified, a total of 40 (44%) have relevance to more than one project. With respect to audiences for Project-specific training, the following job categories were identified as likely targets: Care Management/Coordination/Navigation; Behavioral Health workers (all levels); Primary Care Physicians and Physician Extenders; Clinical Support Staff; Nursing; Other Allied Health; Patient Education Staff; and Administrative/Support staff. As noted in the initial workforce implementation plan, one of the challenges specific to workforce is the ability to coordinate and track training required prior to implementation of the Training Strategy. CCN recognizes this challenge and commits to the development of a detailed training timeline that will bring the necessities of speed and scale into the overall detailed training plan as part of Phase Two development. As such, the Workforce Lead will work with the PMO to determine specific training timelines based on speed and scale to ensure content identification and development are on track. CCN is currently in the process of working with partners to fully identify existing content so that gaps in available training can be further analyzed. While CCN did conduct a thorough evaluation of existing training from local institutions, available training content/materials did not prove to be a good match for project specific training needs.

2) Organizational work-stream specific training – Both Cultural Competency/Health Literacy (CC/HL) and Information Technology (IT) have been identified as organizational work streams that have specific training requirements. As part of the Training Strategy development, it was noted that both the CC/HL and IT work streams operate independently of workforce   As the CCN Training Strategy moves from the strategic planning phase to development of the detailed training plan, the Workforce Lead will coordinate efforts to ensure a unified approach to training that brings project-specific deliverables and organizational work-stream deliverables under one umbrella. Please see the CCN CC/HL Training Strategy for additional information with respect to identified issues and implementation plans. The Workforce Lead will work with the IT lead to ensure training needs are identified and incorporated into the overall training implementation plan for CCN.

3) Occupation-specific Training – The workforce Gap Analysis resulting from comparison of the projected Future State of the CCN workforce to its Current State was instrumental in identifying potential workforce shortages. Training solutions were identified as effective methods for resolving these shortages. Occupation-specific Training needs identified through the Gap Analysis include: 1) Certification training to ensure Peer Support Workers are properly prepared and certified; 2) Specification of training needs for Care/Case Management. Partners suggest training may require identification of core curriculum needs that are enhanced by "tracks" specific to function or location of care provided; 3) Enhancing existing training programs (ex: incentivizing social work and mental health curricula to include primary care placement during training); 4) Expansion of regional offerings (ex: support efforts to bring a Psychiatric Residency program to the region); and 5) Evaluate existing training capacity (i.e. Nursing, Substance Abuse/Behavior Disorder Counselors, Medical Technicians) to ensure adequate access to workers.

Specifically, CCN will partner with local educational institutions, SUNY Central/SUNY RP2, local Area Health Education Centers (AHECs), and other PPSs to this end. In particular, CCN will work with SUNY RP2 to: 1) identify options for certificate based training modules to fill workforce gaps; and 2) identify gaps in locally available training options with those training options available statewide. This will allow CCN to access other regional offerings by way of online coursework and, where possible, localized clinical placements.

Phase Two – Development of the Detailed Training Plan

A priority for the CCN Workforce Lead is to further identify project-specific and organizational work stream training needs on behalf of the PPS. Phase Two training evaluation and implementation includes development of a detailed training plan which will: 1) Identify a the core curriculum outline; 2) Evaluate existing training resources at the partner level to determine partners' ability to "test out" of training; 3) Identify training gaps and prioritizetraining needs; 4) Develop a training timeline; 5) Create a content acquisition plan; 6) Identify training evaluation methods; 7) Identify specific individuals for training; and 8) Create a training work-plan to ensure training needs are met within the required timeline.

Access to Training and Reporting:

CCN has contracted with HWNY to provide access to the online platform known as HWapps throughout the partner network. HWapps provides the following: 1) A central point of training, communication, and reporting access for partners; 2) A fully featured Learning Management System to host online and live trainings; 3) Participant tracking and evaluation; and 4) Ability to enter data about in-person trainings to ensure one repository for training data and reporting.

Summary:

CCN completed a thorough review of its training needs through the efforts of the Workforce Lead, HWNY, WDTT, PMO, CC/HL team, and IT. As a result, CCN identified the Workforce Lead will be primarily responsible for overseeing and implementing training efforts, which includes the creation of a detailed training plan for implementing the Training Strategy. The WDTT will continue to serve as an advisory board to CCN workforce efforts, inclusive of the training strategy. Evaluation of training will be conducted in two phases, the first of which is complete at the conclusion of DY2/Q2; the second of which begins at the start of DY2/Q3. Phase Two training evaluation will involve a more detailed analysis of the project-specific and organizational work-stream training needs identified in Phase One to ensure timely implementation. HWapps will serve as a Learning Management System to increase partner access to training and a single-source repository for workforce reporting.

The Workforce Lead will coordinate training efforts within the PPS, with local partners, and across the region/state to ensure training needs are coordinated efficiently and in a cost effective manner.

Exhibits:

Exhibit A – Training by Project Summary

Trainings Needed	2ai	2biv	2bvii	2ci	2di	3ai	3aii	3bi	3gi	4aiii	4bii
2 Day INTERACT Training			X								
2 Hour INTERACT Leadership Training			X								
30 Day Transition Protocol		X									
5 A's of Tobacco Cessation Training								X			X
BH Works Training						X				X	
Cardiovascular Guideline Education								X			
Care Coordination		X						X			
Care Transition Intervention Training											
CDSMP Master Training (possible)								X			X
CDSMP Peer Leader Training (possible)								X			X
*Certificate Program Integrated Primary Care (Onboarding/Recommend by HANYS)											
*CFR42 Oasis Confidentiality											
Clinical Competencies for Blood Pressure Measurement								X			
Clinical Guidelines (Partner Driven Re: Service/ Eligibility								?			?
CNA Training			X								
Coleman Training for Health Coach		X									
Community Education (Brochure/TV)				X							
Community Resources "Guidebook"				X							
Coordination Evidenced Based Protocols				X				?			?
Coordination Treatment/ Care Protocols				X				?			?
*Crisis De-Escalation and Triage											
*CSS Benefits											
Cultural Competency/ Health Literacy			X	X				X	X		X
*Diversions Management and PPS Hospital Protocol											
DSRIP 101			X	X				X	X		X
EHR Connectivity to RHIOS and SHIN-NY Training			X					?	X		?
Evidenced Based Protocol for Blood Pressure Measurement Competency (Partner Resp)								X			
Evidenced Based Protocols/ Engagement Process				X							
Evidenced Based Protocols/Med Management					X						

Trainings highlighted in yellow indicate a need in multiple projects.

Astrick signifiies trainings recommended by internal Workforce Team

Trainings Needed	2ai	2biv	2bvii	2ci	2di	3ai	3aii	3bi	3gi	4aiii	4bii
Follow Up Care Coordination				X				X			
Health Home Eligibility				X	X						
*High-Tech Nursing Training (PIC line, etc.)											
Home Visitor Safety		X		X	X				X		
*IDN Overview											
*Immunization Training											
Insurance Enrollment Training				X	X						
Intake/Scheduling staff--Social Determinants of Health				X	X						
Integrated Primary Care/ Case Study and Step by Step Guide (Reiter)						X				X	
Integrating Behavioral Health into Primary Care						X				X	
IT Training (HERs; RHIO; Others to be Determined)		X		X	X			?	X		?
*Mandatory Blood Pressure Measurement Competency (Partner Resp.)											
Million Lives								X			
MOLST Training		X		X	X				X		
Motivational Interviewing Training				X	X						
Navigator Training/Trained or Credentialed				X	X						
Navigators Placed in Hot Spot/Patient Activation/Mot. Int.				X	X						
NYS Quits Referral Education								X			X
Orientation and Onboarding				X	X						
Palliative Care vs. Hospice Patient			X						X		
Patient Engagement				X	X						
Patient Navigator Occupational Training--- Certified or Credentialed to be a Patient Navigator				X	X						
*PCMH and Meaningful Use Training											
Personal Centered Methods								X			
Physician Level- Palliative Care/ Behavioral Health									X		
PPS Protocols Home Blood Pressure Measurement Monitoring								X			
PPS Wide Guide for Managing Overall Population Health								?			?
PPS Wide Guide to ID Health Home Patients and Linking to Services Under ACA								?			?
*Preventative Resource Guide											

Trainings highlighted in yellow indicate a need in multiple projects.

*Astrick signifiies trainings recommended by internal Workforce Team

Trainings Needed	2ai	2biv	2bvii	2ci	2di	3ai	3aii	3bi	3gi	4aiii	4bii
Prevention Agenda								?			?
Protocols and Processes for IDS								?			?
Psychotropic Med training/Substance Abuse						X					
Resource Guide Navigation Training				X	X						
*Role Appropriate Competence/ Palliative Care Skills											
*Safety Training for Mobile Crisis Teams											
Screening and Treatment Protocols for Hypertension and High								X			
*SNF's Trained to Connect to RHIO											
SNF's Trained on HER			X								
Substance Abuse Screens and Understanding of Issues						X				X	
*TOL Protocol											
Train Others in PAM protocol				X	X						
Train the Trainer/PAM Training				X	X						
*Training for Billing for Integrated Practice (Coders/Billers)											
Training for Care Coordination Position		X		X	X			X			
Training for Navigators/Insurance Coverage Options				X	X						
Training for Personal Health Record		X									
Training on Care Coordination Software								?			
Training on Community Resources				X	X	X					
Training on VBP			X							X	
Treatment Feedback Protocols								?			
Treatment Value/Linking Patients to Community Organizations				X	X						
*Triage Protocols with ED											
UHS Residency Program						X	X				
*Understanding Triage											
Value of Patient Driven Self Management Goals in the Medical Record				X	X			X			X
Warm Referral Follow Up Training				X	X	X		X			
Warm Referral Training				X	X	X		X	X		
Warm Transfer				X	X	X		X	X		
Working as a Team (Team Roles)			X					X			

Trainings highlighted in yellow indicate a need in multiple projects.

*Astrick signifiies trainings recommended by internal Workforce Team

DSRIP for Health Home Webinar	X	X
Primary Care Integrated Care Plan	X	

Trainings highlighted in yellow indicate a need in multiple projects.
*Astrick signifiies trainings recommended by internal Workforce Team